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MUNICH, GERMANY

December 27, 2000

Assistant Commissioner for Patents
Washington, DC 20231

RE: U.S. Patent Application of Paul Beinat, et al.
For: Claim Assessment Model
Serial No.: 09/539,218
Our Ref: 16132/9108

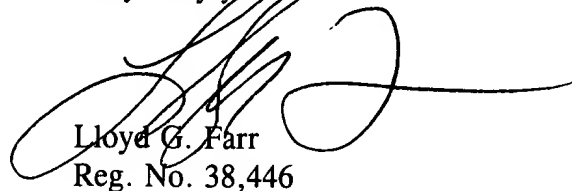
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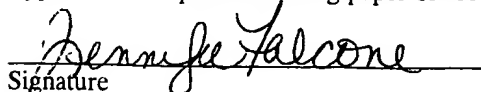

Lloyd G. Farr
Reg. No. 38,446

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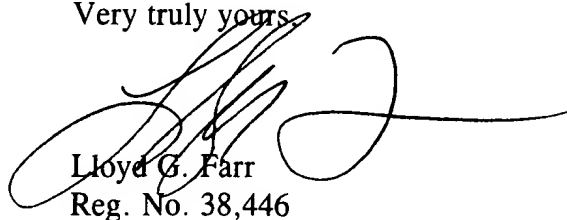
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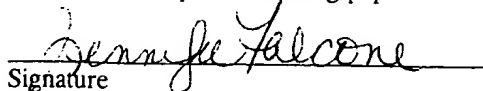
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ATTORNEY DOCKET NO.: 16132/9108

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of)
Paul Beinat, et al.) Examiner: Unknown
Serial No.: 09/539,218) Art Unit: 2768
Filed: March 30, 2000)
For: CLAIM ASSESSMENT MODEL)

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REQUEST TO CORRECT FILING RECEIPT

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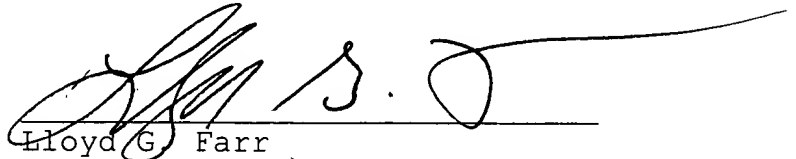
Applicants respectfully request that the filing receipt in the above-referenced application be corrected to show all inventors' names as listed on the enclosed copy of the Patent Application Cover Sheet, as filed on 03/30/00.

Further, however, certain names were misspelled on the original application, and we therefore request that they be listed as follows: Paul Beinat; Barry Hornery; Graham Bartholomew; Nick Townsend. A copy of the issued filing receipt is also enclosed.

Applicants respectfully request issuance of a corrected filing receipt. Please charge any fees required by this request to Deposit Account 50-1196.

Respectfully submitted,

NELSON MULLINS RILEY &
SCARBOROUGH, L.L.P.

A handwritten signature in black ink, appearing to read "Lloyd G. Farr", is written over a horizontal line.

Lloyd G. Farr
Reg. No. 38,446
P. O. Box 11070
Columbia, SC 29211
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PATENT

ATTORNEY DOCKET NO.: PMS-258

UNITED STATES PATENT APPLICATION

OF

PAUL BEINAT
BARRY HORNERY
GRAHAM BARTHOLOMEW
AND
NICK TOWNSEND

FOR

CLAIM ASSESSMENT MODEL



UNITED STATES PATENT AND TRADEMARK OFFICE



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/539,218	03/30/2000	2768	2242	PMS-258	22	86	6

16132/9108

FILING RECEIPT



OC000000005430301

Lloyd G Farr
Nelson Mullins Riley & Scarborough L L P
P O Box 11070
1330 Lady Street
Columbia, SC 29211

Date Mailed: 09/27/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Paul Beinat, Sydney, AUSTRALIA;
Barry Hornery, Sydney, AUSTRALIA;
Griham Bartholomew, Sydney, AUSTRALIA;
Nick Townsend, Sydney, AUSTRALIA;

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OCT - 5 2000

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COLUMBIA OFFICE

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 06/05/2000

Title

Claim assessmant model

Preliminary Class

705

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Data entry by : WILLIAMS, EVERETT

Team : OIPE

Date: 09/27/2000



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Title 37, Code of Federal Regulations, 5.11 & 5.15



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Bib Data Sheet

CONFIRMATION NO. 8960

SERIAL NUMBER 09/539,218	FILING DATE 03/30/2000 RULE	CLASS 705	GROUP ART UNIT 2768	ATTORNEY DOCKET NO. PMS-258
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APPLICANTS

 Paul Beinat, Sydney, AUSTRALIA;
 Barry Hornery, Sydney, AUSTRALIA;
 Graham Bartholomew, Sydney, AUSTRALIA;
 Nick Townsend, Sydney, AUSTRALIA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

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 GRANTED ** 06/05/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 22	TOTAL CLAIMS 86	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

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 Columbia, SC 29211

TITLE

Claim assessmant model

FILING FEE RECEIVED 2242	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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